This form is available electronically. FSA-2103 U.S. DEPARTMENT OF AGRICULTURE **PART A - GENERAL INFORMATION** Farm Service Agency (01-20-04) NAME OF BORROWER: A. LAST NAME C. MIDDLE B. FIRST NAME **DIRECT LOAN MAKING** INITIAI **FILE REVIEW QUESTIONNAIRE** 2. DATE (MM-DD-YYYY) 4. COUNTY CODE 3. STATE CODE 5. BORROWER IDENTIFICATION NO. 6. SERVICE CENTER MAIL CODE 7. DISTRICT NUMBER 8. STATE ABBREVIATION 9. TYPE OF ASSISTANCE CODE 11. LOAN TYPE (Check one below:) 10. LOAN AMOUNT Initial Loan Subsequent Loan PART B - REVIEWER'S INSTRUCTIONS All "NO" answers (and N/A when judged necessary by the reviewer) require a detailed explanation of the weaknesses YES NO N/A identified. General statements are not acceptable. (Furnish attachments and statements to support findings in Part C, Remarks, on Page 2.) 1. Were all components of the assessment addressed by the FLM with direct input from the borrower? 2. For an individual applicant, is there sufficient documentation to meet the test for credit requirement before credit is extended? 3. For an entity applicant, has each member provided sufficient documentation to meet the test for credit requirements, as well as the entity as a whole, before credit is extended? 4. For beginning farmer loans, was the applicant correctly classified as a beginning farmer? 5. For SDA's, was a proper determination made and was the loan funded as a SDA? 6. Has the FLM determined and documented that the applicant has selected, established, and is maintaining the required record keeping system? 7. Have the environmental regulations been followed? 8. Were realistic commodity prices used to develop FSA-431-2? 9. Were realistic commodity/livestock yields used in the projected FSA-431-2 and was the basis for their use documented? 10. Were realistic family living expenses used to develop FSA-431-2? 11. Were realistic operating expenses used to develop FSA-431-2? 12. Was nonfarm and other-farm income verified and properly included on FSA-431-2? 13. Does the debt repayment schedule reflect correct amounts and all creditors? 14. Was FSA-431-2 feasible at the time of the loan approval? 15. Does the file contain verification of the applicant's debts, and the creditor's security interest in collateral? 16. Has FSA-1962-1 been properly completed? 17. Have lien searches and/or title opinions been obtained? 18. Have the required security instruments been properly prepared, filed, and maintained? 19. Are appraisals prepared when required and in accordance with prescribed procedures? 20. Was security adequate for the loan? 21. Is there a properly completed FSA-1945-22 in the file? (EM loans only.) 22. Are disaster losses properly calculated by using the correct acreage, yields and unit prices on FSA 1945-26 and does the form include other disaster compensation? 23C. REVIEWER'S SIGNATURE 23A. NAME 23B. TITLE

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PART C - COMMENTS					
1.	NAME OF BORROWER:			D. BORROWER IDENTIFICATION NO.	E. SERVICE CENTER MAIL CODE
	LAST NAME	B. FIRST NAME	C. MIDDLE		
\\\.	LAOT NAME	B. TINOT WAINE	INITIAL		
2.	REMARKS: All "NO" answers	(and "N/A" when judged neces	ssary by the r	reviewer) require a detailed explanation	of the weaknesses identified
	in Part B, Items 1 through 22.	(Please include the Item No.)	with each cor	mment.)	